

**NARRATOR RECOMMENDATION FORM** OH# \_\_\_\_\_

**PROJECT NAME: Chinese American Oral History Project**

<b>NARRATOR'S NAME:</b>	<b>CONTACT Phone:</b> _____ <b>Email</b> _____
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<b>PLACE OF RESIDENCE (City/Neighborhood):</b> <b>GENDER: F M Other</b>	<b>YEAR OF BIRTH:</b>
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**Biographical Categories (Check all that apply):**

Born prior to 1926: part of the World War II generation

Born 1927 to 1944; part of the Korean War generation

Born 1945 to 1960; baby boomer generation

Lived in the greater Los Angeles area

Lived in San Gabriel Valley

Knowledge of Asian American neighborhoods

Asian organization or community activities

Veteran

Cultural Background (ex: Chinese, Hmong, Vietnamese):

Other: (describe)

**Please circle the best day(s) of the week and list time(s) available for interview.**

MON	TUES	WED	THUR	FRI	SAT	SUN
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**RECOMMENDED BY (Print Name):** First \_\_\_\_\_ Last \_\_\_\_\_

**CONTACT: Phone** \_\_\_\_\_

<b>Date:</b> _____ <b>Time:</b> _____ <b>Location:</b> _____	<b>Language Preference:</b>
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